

Intent:

This report contains high-level information on the Prescription Drug Monitoring Program (PDMP) and is intended to provide a summary of registration and reporting data specific to your profession. This report includes data up to September 2018.



Overview:

The PDMP began in 2008 and is housed with the Board of Pharmacy under the Department of Commerce, Community, and Economic Development (DCCED) – Corporations, Business, and Professional Licensing (CBPL) section. Mandatory registration, reviewing, and reporting requirements went into effect in July 2017. All actively licensed practitioners with a valid DEA registration are required to register with the database; however, there are both practice-specific and supply-duration exemptions in AS 17.30.200(k) and (u) in which practitioners are not required to consult the PDMP. Generally, practitioners are required to review patient prescription history before prescribing, administering, and/or directly dispensing a federally scheduled II – IV controlled substance. If directly dispensing, practitioners must report this information to the PDMP on a daily basis. Information on exemptions can be found www.pdmp.alaska.gov under the Registration and Use Exemptions tab and includes information for federally-employed practitioners and pharmacists as well as information on situational exemptions to PDMP use. If mandatory registration and use exemptions do not apply and a licensee fails to register with the PDMP, disciplinary action may be taken by the State Medical Board.

Delegate access is allowed so long as the delegate holds an active license, certification, or registration under AS 08. Delegate access can help relieve time-constraints as reviewing and reporting tasks can be distributed to qualified staff.

Updates and Imminent changes:

- PDMP fees for initial and continued access went into effect on April 22, 2018 by authority of AS 17.30.200, which was subsequently implemented under 12 AAC 02.107. This requires a \$25.00 fee to be submitted before access to the controlled substance prescription database is granted.
- The Board of Veterinary Examiners is responsible for making available materials and resources to assist its licensees in identifying owners who may be at risk for abusing or misusing opioids. The board has made available an opioid prescribing resource document originally published by the American Veterinary Medical Foundation (AVMF) and is accessible at: <https://www.avma.org/KB/Resources/Reference/Pages/opioid-resources-for-veterinarians.aspx>
- The Department of Law opined on December 1, 2017 through the request of the Board of Pharmacy that veterinarians have the legal ability to conduct patient prescription history queries on animal owners in order to comply with applicable sections of AS 17.30.200 and AS 08.98.050.
- An Awareness and Feedback Questionnaire, developed per the directive of the CDC, was made available from May 2018 to June 2018. Out of 402 total respondents, 21 (5.24%) of veterinarians participated. Preliminary results can be found at www.pdmp.alaska.gov.
- Beginning June 2018, the PDMP began separating federal practitioners and pharmacists from those *required* to register by updating user roles, e.g.: 'Physician' to 'IHS Prescriber' (Indian Health Service) Prescriber.

- Beginning June 2018, all newly registered and renewed PDMP users are issued separate PDMP registration numbers and are searchable by name under the program ‘Prescription Drug Monitoring Program’ at: <https://www.commerce.alaska.gov/cbp/main/Search/Professional>

Data:

The Alaska State Board of Veterinary Examiners regulates veterinarians and veterinary technicians. As of September 30, 2018, there are a total of 6,375 registered users, 248 of which are veterinarians (Figure 1). The proportion of total licensed veterinarians registered with the PDMP is 62%; 38% are not registered potentially due to non-compliance or not having an active Drug Enforcement Administration (DEA) registration.

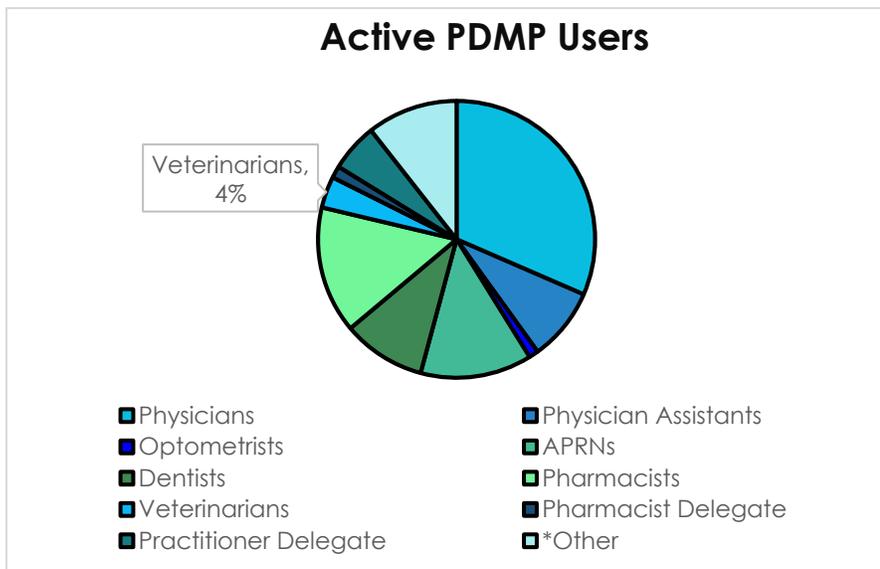


Figure 1. Veterinarians comprise 4% of actively registered users. *Other includes IHS and VA prescribers and dispensers, military prescribers, admin, medical examiners/coroners, and out-of-state pharmacists.

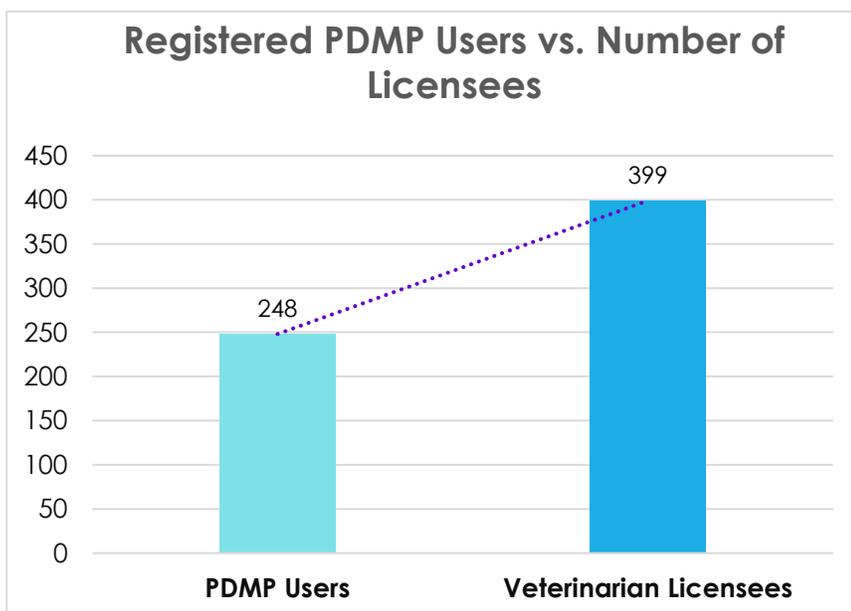


Figure 2. The proportion of licensed veterinarians to registered PDMP users is represented; however, some licensed veterinarians may be excluded from this figure due to not holding an active DEA registration.

Figure 3 below shows the number of opioid prescriptions dispensed against the number of patient prescription history requests. Figures 4 – 6 shows the interaction activities of physicians and physician assistants captured from January 2017 to September 2018.

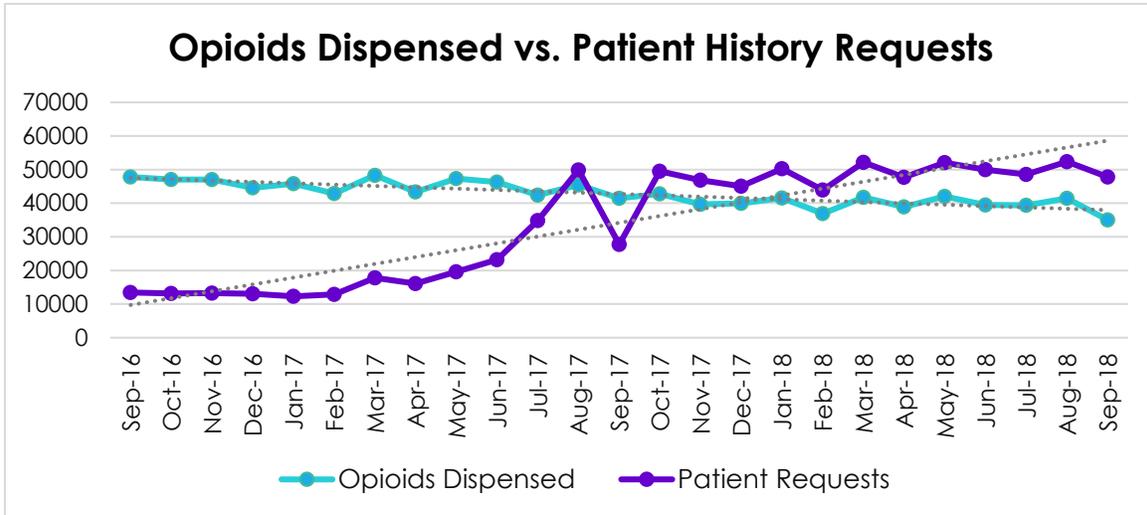


Figure 3. This graph shows the upward trend of patient prescription history requests in the PDMP, suggesting an inverse relationship between overall opioid dispensing in the state. The decrease in opioid dispensations may also be attributed to other factors, including prescriptive policies and salience of increased state-wide monitoring of prescribing practices as reflected in individual prescriber report cards.

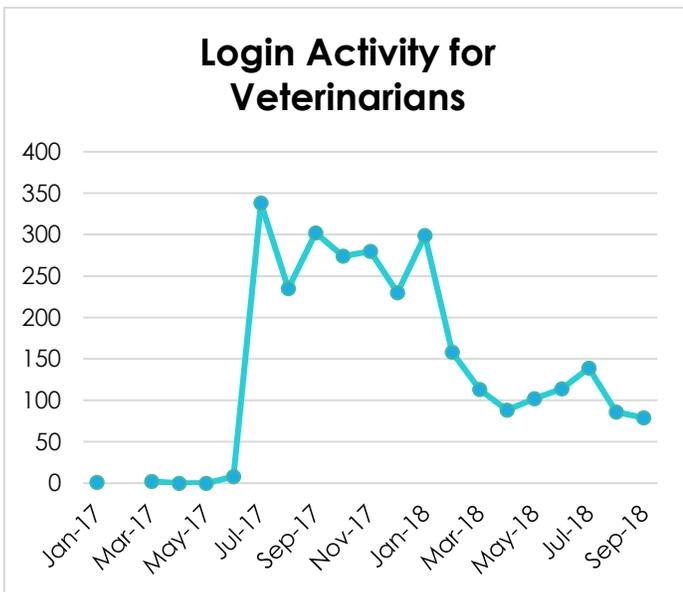


Figure 4. Login activity for veterinarians increased dramatically following mandatory reviewing requirements effective in July 2017 and was steady until January 2018. Logins have decreased substantially since the beginning of the year.

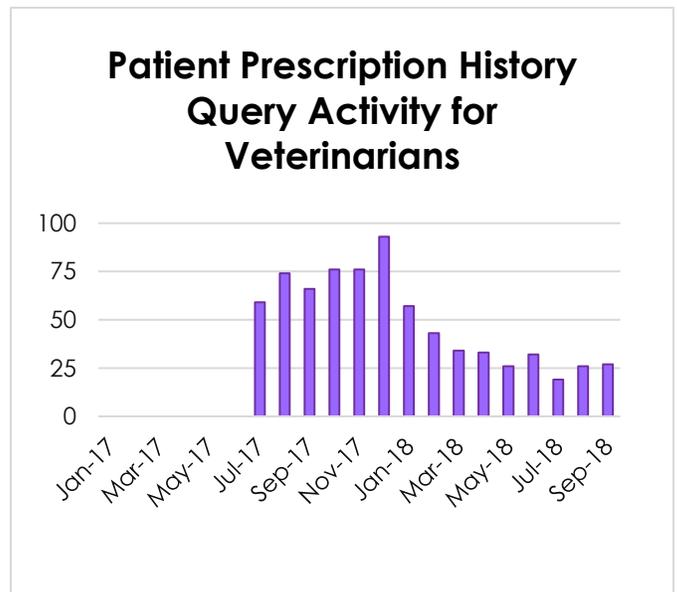


Figure 5. There have been a total of 744 patient requests conducted by veterinarians since January 2017, with requests peaking in January 2018. Requests have steadily declined since the beginning of the year.

Figure 6 below shows the number of morphine milligram equivalents (MME) prescribed (subsequently dispensed) by profession. MMEs is a standardized measurement used to represent the potency of opioids but excludes buprenorphine as a partial opioid agonist.

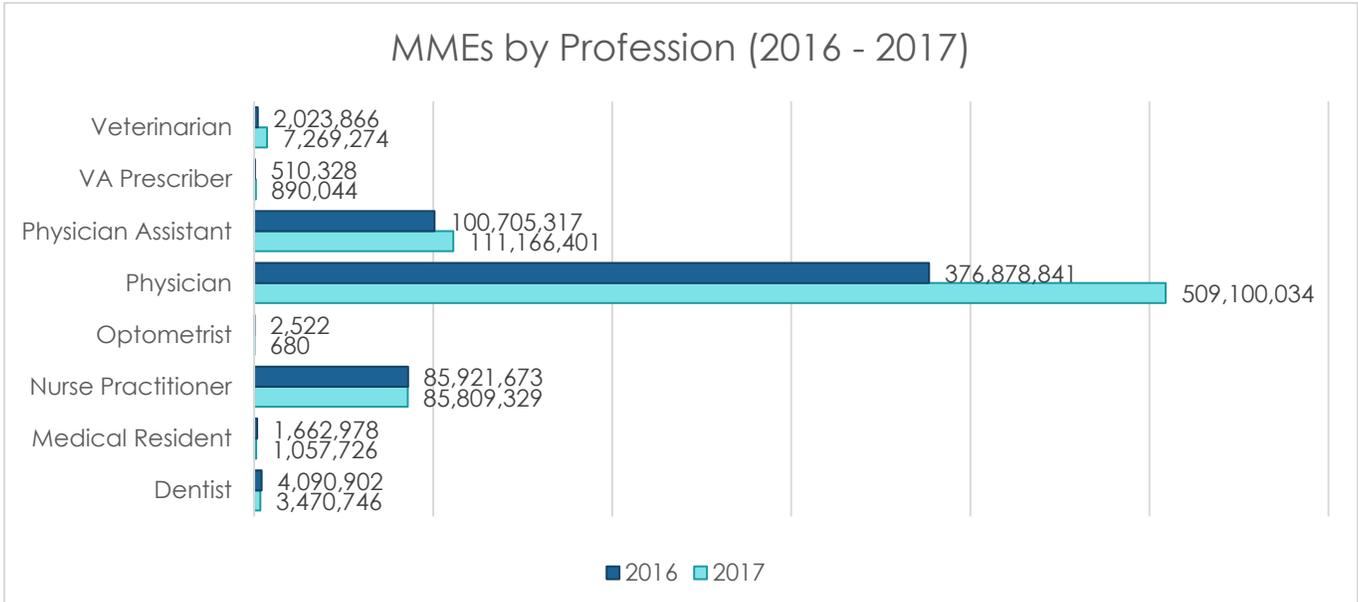


Figure 6. MMEs prescribed by veterinarians in 2016 and 2017 ranged from .3% to 1% of total MMEs by profession.

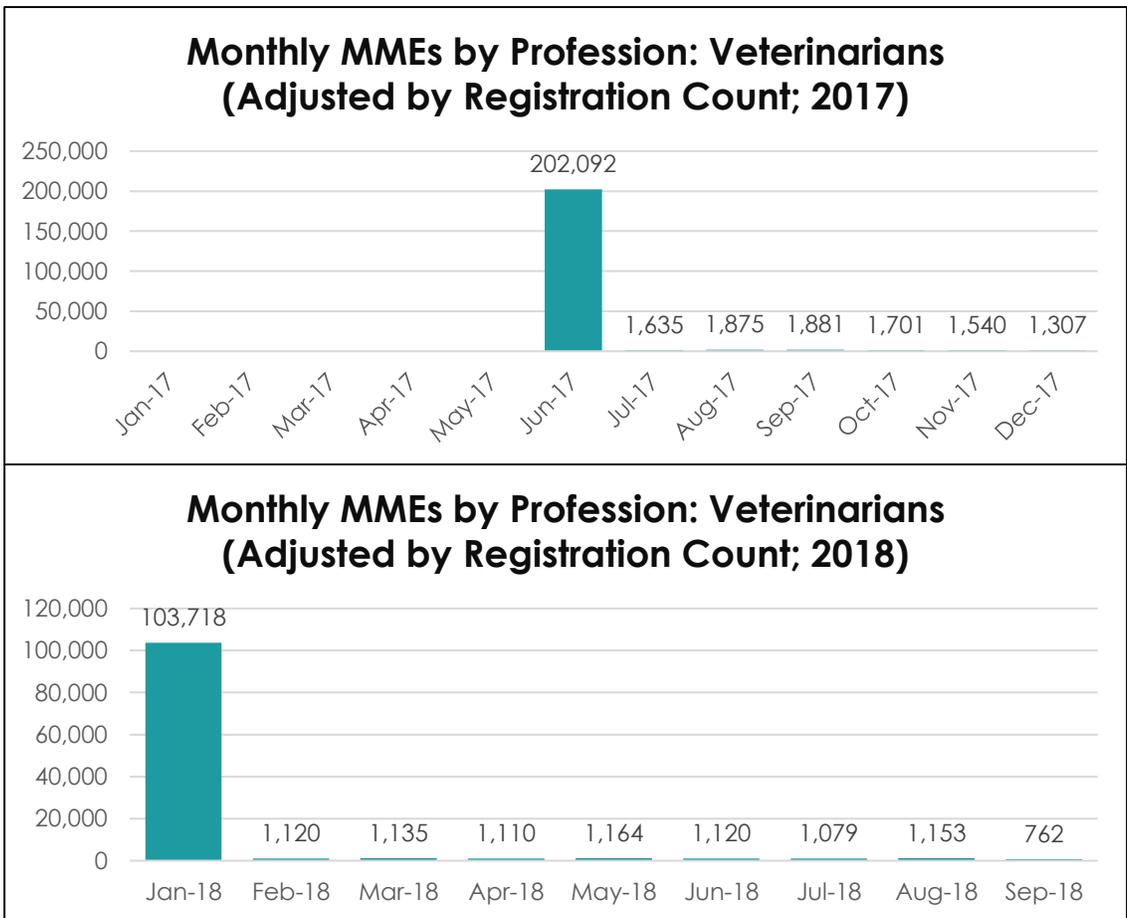


Figure 7. MMEs per month by profession and adjusted by registration count.

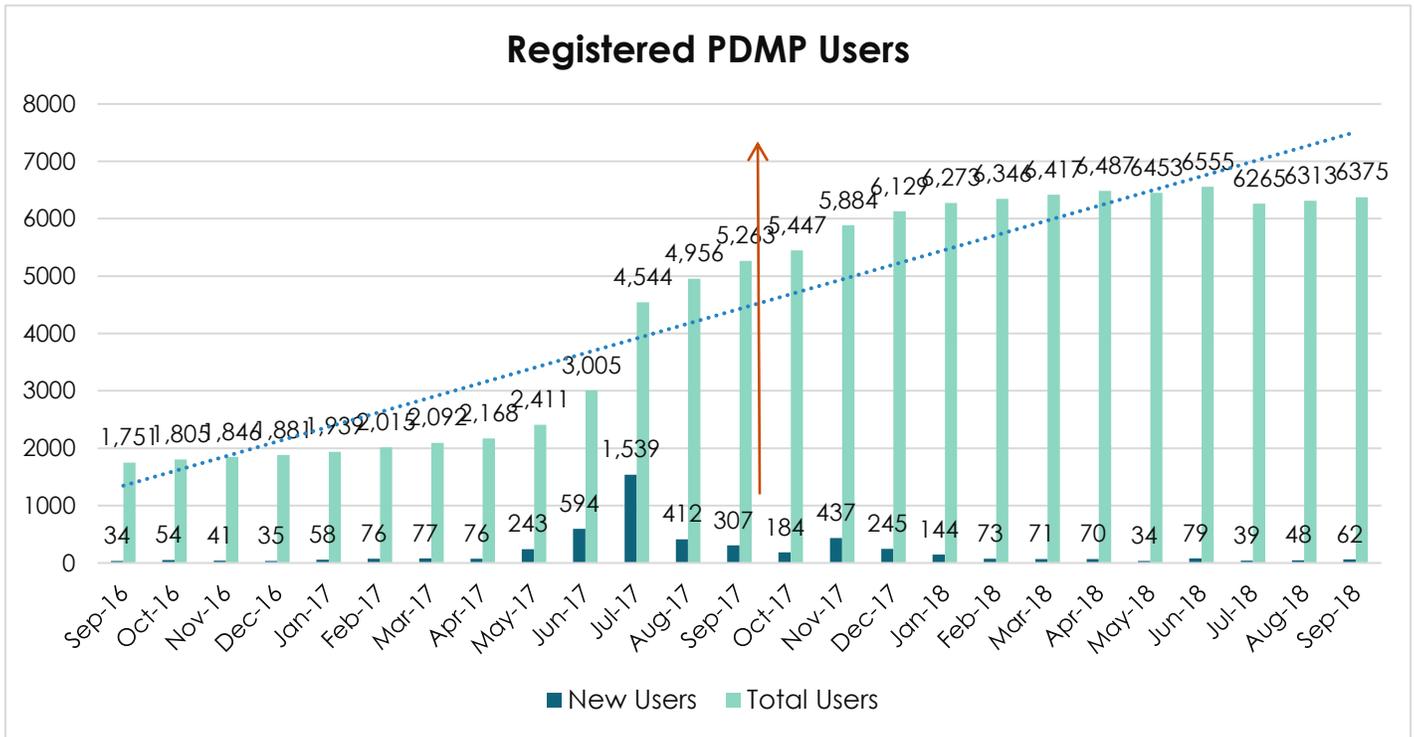


Figure 8. Registered users have steadily increased. New registrations peaked with 1,539 new practitioners and pharmacists, coinciding with the mandatory registration date of July 2017. The increase of new registrations for May and June may not correlate with the total number of registered users as PDMP registrations were deactivated and user roles changed due to filtering and clean-up processes beginning June 2018 for registration renewal.